

Inspection Conclusion Data Sheet (ICDS)

FY2006

Inspector: Steven Couto

Inspection Date: 6/1/06

Facility Name/Address: Brockton POTW 303 Oak Hill Way
Brockton, MA 02401

Facility Manager/Title and Address (if different from above):
David Norton, Contract Administrator Water & Sewer

Facility Contact/Title and Address (if different from above):
Same

1. Media Type: (Check one)

- | | | |
|-----------------------------------------------|------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> CAA-Stationary | <input type="checkbox"/> CAA-Mobile Source | <input type="checkbox"/> CAA-112r |
| <input checked="" type="checkbox"/> CWA-NPDES | <input type="checkbox"/> CWA-Pretreatment POTW | <input type="checkbox"/> CWA-Pretreatment IU |
| <input checked="" type="checkbox"/> CWA 311 | <input type="checkbox"/> CWA 404 | |
| <input type="checkbox"/> EPCRA 313 | <input type="checkbox"/> EPCRA N313 | |
| <input type="checkbox"/> RCRA-C | <input type="checkbox"/> RCRA-I | |
| <input type="checkbox"/> SDWA-UIC | <input type="checkbox"/> SDWA-PWSS | |
| <input type="checkbox"/> TSCA-Lead Paint | <input type="checkbox"/> TSCA-PCBs | <input type="checkbox"/> TSCA-Core <input type="checkbox"/> TSCA-AHERA |

2. Did you observe deficiencies (potential violations) during the inspection?

☐ Yes ☒ No

3. If you observed deficiencies, did you communicate them to the facility during the inspection?

☐ Yes ☐ No

4. Deficiencies observed?

____ Potential violation of a compliance schedule in an enforceable order.

____ Potential failure to maintain a record or failure to disclose a document.

____ Potential failure to maintain, inspect or repair equipment including meters, sensors, and recording equipment.

____ Potential failure to complete or submit a notification, report, certification, or manifest.

____ Potential failure to obtain a permit, product approval, or certification.

- ____ Potential failure to follow a required sampling or monitoring procedure or laboratory procedure.
- ____ Potential failure to follow or develop a required management practice or procedure.
- ____ Potential failure to identify and manage a regulated waste or pollutant in any media.
- ____ Potential failure to report regulated events such as spills, accidents, etc.
- ____ Potential incorrect use of a material (e.g., pesticide, waste, product, etc.) or use of improper or unapproved material.
- ____ Potential failure to follow a permit condition(s).

5 Did you observe or see the facility take any actions during the inspection to address the deficiencies communicated to the facility?

☐ Yes ☐ No ☒ N/A only if #3 was NO.

If YES, check only the action(s) actually observed/seen or write in a short description of the action in the "optional" section. (Check all that apply)

Action(s) taken

- ____ Complete(d) a Notification or Report
- ____ Correct(ed) Monitoring Deficiencies
- ____ Correct(ed) Record Keeping Deficiencies
- ____ Implemented New or Improved Management Practices or Procedures
- ____ Improved Pollutant Identification (e.g., Labeling, Manifesting, Storage, etc.)
- ____ Reduced Pollution (e.g., Use Reduction, Industrial Process Change, Emissions or Discharge Change, etc.)
- ____ Request(ed) a Permit Application or Applied for a Permit
- ____ Verified Compliance with Previously Issued Enforcement Action - Part or All Conditions

The following common air or water pollutant(s) **should only be checked** if the "Reduced Pollution" line was checked.

Water: ☐ Ammonia ☐ BOD ☐ COD ☐ TSS ☐ O/G ☐ Total Coliform ☐ D.O.
☐ Metals ☐ Cyanide ☐ Other _____

Air: ☐ NO_x ☐ SO₂ ☐ PM ☐ VOC ☐ Metals ☐ HAPs ☐ CO
☐ Other _____

6. Did you provide general compliance assistance in accordance with the policy on the Role of the EPA Inspector in Providing Compliance Assistance During Inspections?

☐ Yes ☒ No

7. Did you provide site-specific compliance assistance in accordance with the policy on the Role of the EPA Inspector in Providing Compliance Assistance During Inspections?

☐ Yes

☒ No

Optional Additional Information: EPA inspectors may wish to provide a narrative description of actions taken by the facility or assistance to help the facility come into compliance. (Narratives may be used in national or regional reports to provide examples of EPA inspection outcomes).

INSTRUCTIONS

Section A: National Data System Coding (i.e., PCS)

Column 1: Transaction Code: Use N, C, or D for New, Change, or Delete. All inspections will be *new* unless there is an error in the data entered.

Columns 3-11: NPDES Permit No. Enter the facility's NPDES permit number - third character in permit number indicates permit type for U=unpermitted, G=general permit, etc.. (Use the Remarks columns to record the State permit number, if necessary.)

Columns 12-17: Inspection Date. Insert the date entry was made into the facility. Use the year/month/day format (e.g., 04/10/01 = October 01, 2004).

Column 18: Inspection Type*. Use one of the codes listed below to describe the type of inspection:

A	Performance Audit	U	IU Inspection with Pretreatment Audit	!	Pretreatment Compliance (Oversight)
B	Compliance Biomonitoring	X	Toxics Inspection	@	Follow-up (enforcement)
C	Compliance Evaluation (non-sampling)	Z	Sludge - Biosolids	{	Storm Water-Construction-Sampling
D	Diagnostic	#	Combined Sewer Overflow-Sampling	}	Storm Water-Construction-Non-Sampling
F	Pretreatment (Follow-up)	\$	Combined Sewer Overflow-Non-Sampling	:	Storm Water-Non-Construction-Sampling
G	Pretreatment (Audit)	+	Sanitary Sewer Overflow-Sampling	~	Storm Water-Non-Construction-Non-Sampling
I	Industrial User (IU) Inspection	&	Sanitary Sewer Overflow-Non-Sampling	<	Storm Water-MS4-Sampling
J	Complaints	\	CAFO-Sampling	-	Storm Water-MS4-Non-Sampling
M	Multimedia	=	CAFO-Non-Sampling	>	Storm Water-MS4-Audit
N	Spill	2	IU Sampling Inspection		
O	Compliance Evaluation (Oversight)	3	IU Non-Sampling Inspection		
P	Pretreatment Compliance Inspection	4	IU Toxics Inspection		
R	Reconnaissance	5	IU Sampling Inspection with Pretreatment		
S	Compliance Sampling	6	IU Non-Sampling Inspection with Pretreatment		
		7	IU Toxics with Pretreatment		

Column 19: Inspector Code. Use one of the codes listed below to describe the lead agency in the inspection.

A	State (Contractor)	O	Other Inspectors, Federal/EPA (Specify in Remarks columns)
B	EPA (Contractor)	P	Other Inspectors, State (Specify in Remarks columns)
E	Corps of Engineers	R	EPA Regional Inspector
J	Joint EPA/State Inspectors—EPA Lead	S	State Inspector
L	Local Health Department (State)	T	Joint State/EPA Inspectors—State lead
N	NEIC Inspectors		

Column 20: Facility Type. Use one of the codes below to describe the facility.

- 1 — Municipal. Publicly Owned Treatment Works (POTWs) with 1987 Standard Industrial Code (SIC) 4952.
- 2 — Industrial. Other than municipal, agricultural, and Federal facilities.
- 3 — Agricultural. Facilities classified with 1987 SIC 0111 to 0971.
- 4 — Federal. Facilities identified as Federal by the EPA Regional Office.
- 5 — Oil & Gas. Facilities classified with 1987 SIC 1311 to 1389.

Columns 21-66: Remarks. These columns are reserved for remarks at the discretion of the Region.

Columns 67-69: Inspection Work Days. Estimate the total work effort (to the nearest 0.1 work day), up to 99.9 days, that were used to complete the inspection and submit a QA reviewed report of findings. This estimate includes the accumulative effort of all participating inspectors; any effort for laboratory analyses, testing, and remote sensing; and the billed payroll time for travel and pre and post inspection preparation. This estimate does not require detailed documentation.

Column 70: Facility Evaluation Rating. Use information gathered during the inspection (regardless of inspection type) to evaluate the quality of the facility self-monitoring program. Grade the program using a scale of 1 to 5 with a score of 5 being used for very reliable self-monitoring programs, 3 being satisfactory, and 1 being used for very unreliable programs.

Column 71: Biomonitoring Information. Enter D for static testing. Enter F for flow through testing. Enter N for no biomonitoring.

Column 72: Quality Assurance Data Inspection. Enter Q if the inspection was conducted as followup on quality assurance sample results. Enter N otherwise.

Columns 73-80: These columns are reserved for regionally defined information.

Section B: Facility Data

This section is self-explanatory except for "Other Facility Data," which may include new information not in the permit or PCS (e.g., new outfalls, names of receiving waters, new ownership, other updates to the record, SIC/NAICS Codes, Latitude/Longitude).

Section C: Areas Evaluated During Inspection

Check only those areas evaluated by marking the appropriate box. Use Section D and additional sheets as necessary. Support the findings, as necessary, in a brief narrative report. Use the headings given on the report form (e.g., Permit, Records/Reports) when discussing the areas evaluated during the inspection.

Section D: Summary of Findings/Comments

Briefly summarize the inspection findings. This summary should abstract the pertinent inspection findings, not replace the narrative report. Reference a list of attachments, such as completed checklists taken from the NPDES Compliance Inspection Manuals and pretreatment guidance documents, including effluent data when sampling has been done. Use extra sheets as necessary.

*Footnote: In addition to the inspection types listed above under column 18, a state may continue to use the following wet weather and CAFO inspection types until the state is brought into ICIS-NPDES: K: CAFO, V: SSO, Y: CSO, W: Storm Water 9: MS4. States may also use the new wet weather, CAFO and MS4 inspections types shown in column 18 of this form. The EPA regions are required to use the new wet weather, CAFO, and MS4 inspection types for inspections with an inspection date (DTIN) on or after July 1, 2005.



"Roy, Gregory"
<RoyG@cdm.com>

09/07/2006 07:35 AM

To Steven Couto/R1/USEPA/US@EPA

cc Norton David <dnorton@ci.brockton.ma.us>, "Hoar, John"
<HoarJM@cdm.com>

bcc

Subject Brockton WWTF SWPPP

Hi Steve,

As requested, I have enclosed documents showing that the Brockton SWPPP was created and sent to EPA in Washington. The enclosed PDF has the transmittal letter, Notice of Intent, and table of contents for the SWPPP. I assume this satisfies your request? I hope you are aware that the WWTF operator is following the requirements of this SWPPP.

Regarding SPCC My understanding is that there will be no comments from EPA regarding the SPCC requirements and we should proceed with finalizing the document. Please confirm that this is accurate.

Thanks,

Greg

<<DOC090706.pdf>>

Gregory A. Roy

CDM

One Cambridge Place
50 Hampshire Street
Cambridge, MA 02139
phone: (617) 452-6644
fax: (617) 452-8644
cell: (508) 878-7322



DOC090706.pdf



One Cambridge Place, 50 Hampshire Street
Cambridge, Massachusetts 02139
tel: 617 452-6000
fax: 617 452-8000

March 7, 2003

Storm Water Notice of Intent
EPA East Building, Rm. 7420
1201 Constitution Avenue, NW
Washington, DC 20004

Subject: Brockton Advanced Water Reclamation Facility SWPPP

To Whom It May Concern:

Enclosed is the Notice of Intent for the Brockton Advanced Water Reclamation Facility (and Residuals Landfill) located in Brockton, MA. The Facility intends to be authorized to discharge stormwater under the Multi-Sector General Permit. A Stormwater Pollution Prevention Plan has been prepared for the facility and is available at appropriate locations.

Very truly yours,

Carolyn Gilbert
Camp Dresser & McKee Inc.

cc: Robert Smith, City of Brockton
Craig Young, City of Brockton
Michael Curtin, City of Brockton
Hubert Spurway, US Filter
Greg Roy, CDM
Patrick Hughes, CDM

Document code

Notice of Intent for Storm Water Discharges Associated with
INDUSTRIAL ACTIVITY Under the Multi-sector NPDES General Permit

Submission of this completed Notice of Intent (NOI) constitutes notice that the entity in Section B intends to be authorized to discharge pollutants to waters of the United States, from the facility or site identified in Section C, under EPA's Storm Water Multi-sector General Permit (MSGP). Submission of the NOI also constitutes notice that the party identified in Section B of this form has read, understands, and meets the eligibility conditions of Part I of the MSGP; agrees to comply with all applicable terms and conditions of the MSGP; understands that continued authorization under the MSGP is contingent on maintaining eligibility for coverage, and that implementation of the permittee's pollution prevention plan is required two days after a complete NOI is mailed. In order to be granted coverage, all information required on this form must be completed. Please read and make sure you comply with all permit requirements, including the requirement to prepare and implement a storm water pollution prevention plan.

A. Permit Selection

If new, enter generic permit, otherwise enter previous permit: MAIRIC5161111

New Permit Number(EPA Use Only)
 111051111

B. Facility Operator Information

1. Name: WIS ILLIETIE 2. Phone: 50181981078815
3. Mailing Address: a. Street or P.O. Box: BR 31 0A 1E 1H 1L 1W 1Y
b. City: BR 31 0A 1E 1H 1L 1W 1Y c. State: MA d. Zip Code: 012301

C. Facility/Site Information

1. Facility/Site Name: BIRICKITON ADVIANCEFIELD WASTE RECLAMATION FACILITY

2. Location Address: a. Street: 3031 DIAKIHU LILIA WAY

b. City: BIRICKITON c. County: PILYMOOUTH

d. State: MA e. Zip Code: 02301 f. Latitude: 42 02 49 g. Longitude: 171 00 28

3. If you are filing as a co-permittee, enter storm water general permit number:

4. a. Permit Applicant: ☐ Federal ☐ State ☐ Tribal ☐ Private ☒ Other public entity

b. Is the facility located on Indian Country Lands? ☐ Yes ☒ No

5. Does the facility discharge storm water into:

a. Receiving water(s)? ☒ Yes ☐ No If yes, name(s) of receiving water(s): Edson Brook and

b. A municipal separate storm sewer system (MS4)? ☐ Yes ☒ No SHANNISBURRY PILGRIM

If yes, name of the MS4 operator: RIVER

6. The 4-digit Standard Industrial Classification (SIC) codes or the 2-letter Activity Codes that best represent the principal products produced or services rendered by your facility and major co-located activities:

Primary: FI Secondary (if applicable): FI

7. Applicable sector(s) of industrial activity, as designated in Part 1.2.1 of the MSGP, that include associated discharges that you seek to have covered under this permit (choose up to three):

- | | | | | | |
|-----------------------------------|-----------------------------------|----------------------------------------------|----------------------------------------------|-----------------------------------|------------------------------------|
| <input type="checkbox"/> Sector A | <input type="checkbox"/> Sector F | <input type="checkbox"/> Sector K | <input type="checkbox"/> Sector P | <input type="checkbox"/> Sector U | <input type="checkbox"/> Sector Z |
| <input type="checkbox"/> Sector B | <input type="checkbox"/> Sector G | <input checked="" type="checkbox"/> Sector L | <input type="checkbox"/> Sector Q | <input type="checkbox"/> Sector V | <input type="checkbox"/> Sector AA |
| <input type="checkbox"/> Sector C | <input type="checkbox"/> Sector H | <input type="checkbox"/> Sector M | <input type="checkbox"/> Sector R | <input type="checkbox"/> Sector W | <input type="checkbox"/> Sector AB |
| <input type="checkbox"/> Sector D | <input type="checkbox"/> Sector I | <input type="checkbox"/> Sector N | <input type="checkbox"/> Sector S | <input type="checkbox"/> Sector X | <input type="checkbox"/> Sector AC |
| <input type="checkbox"/> Sector E | <input type="checkbox"/> Sector J | <input type="checkbox"/> Sector O | <input checked="" type="checkbox"/> Sector T | <input type="checkbox"/> Sector Y | <input type="checkbox"/> Sector AD |

8. Additional Facility/Site Requirements:

a. Based on the instructions provided in Addendum A of the MSGP, have the eligibility criteria for "listed species" and critical habitat been met? ☒ Yes ☐ No

b. Based on the instructions provided in Addendum B of the MSGP, have the eligibility criteria for protection of historic properties been met? ☒ Yes ☐ No

D. Certification

Do you certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted? Based on your inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, do you certify that the information submitted is, to the best of your knowledge and belief, true, accurate, and complete? Do you certify that you are aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations?

Print Name: PICIBERIT ISMITH

Signature: Robert D. Smith

Date: 03/05/2021

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Notice of Intent for Storm Water Discharges Associated with
INDUSTRIAL ACTIVITY Under the Multi-sector NPDES General Permit

Submission of this completed Notice of Intent (NOI) constitutes notice that the entity in Section B intends to be authorized to discharge pollutants to waters of the United States, from the facility or site identified in Section C, under EPA's Storm Water Multi-sector General Permit (MSGP). Submission of the NOI also constitutes notice that the party identified in Section B of this form has read, understands, and meets the eligibility conditions of Part I of the MSGP; agrees to comply with all applicable terms and conditions of the MSGP; understands that continued authorization under the MSGP is contingent on maintaining eligibility for coverage, and that implementation of the permittee's pollution prevention plan is required two days after a complete NOI is mailed. In order to be granted coverage, all information required on this form must be completed. Please read and make sure you comply with all permit requirements, including the requirement to prepare and implement a storm water pollution prevention plan.

A. Permit Selection

If new, enter generic permit, otherwise enter previous permit: W16925X#X#X

New Permit Number(EPA Use Only)			
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LL R05 L L L L

B. Facility Operator Information

1. Name: WIS FILITER 2. Phone: 5084807285
3. Mailing Address: a. Street or P.O. Box: 303 CLARK HILLWAY
b. City: BURLINGTON c. State: MA d. Zip Code: 01750

C. Facility/Site Information

1. Facility/Site Name: BROCKTON ADVANCED WATER RECLAMATION FACILITY
 2. Location Address: a. Street: 101 BROAD HILL ROAD
 b. City: BROCKTON c. County: PLYMOUTH
 d. State: MA e. Zip Code: 01901 f. Latitude: 42° 00' 45" g. Longitude: -71° 00' 30"

3. If you are filing as a co-permittee, enter storm water general permit number:

4.a. Permit Applicant: ☐ Federal ☐ State ☐ Tribal ☐ Private ☒ Other public entity

b. Is the facility located on Indian Country Lands? ☐ Yes ☒ No

5. Does the facility discharge storm water into:

a. Receiving water(s)? ☒ Yes ☐ No If yes, name(s) of receiving water(s): CHALK RIVER, PILAHAW

b. A municipal separate storm sewer system (MS4)? ☐ Yes ☒ No CIVER

If yes, name of the MS4 operator: _____

6. The 4-digit Standard Industrial Classification (SIC) codes or the 2-letter Activity Codes that best represent the principal products produced or services rendered by your facility and major co-located activities:

Primary: 1101 Secondary (if applicable): 1111

7. Applicable sector(s) of industrial activity, as designated in Part 1.2.1 of the MSGP, that include associated discharges that you seek to have covered under this permit (choose up to three):

- | | | | | | |
|-----------------------------------|-----------------------------------|----------------------------------------------|----------------------------------------------|-----------------------------------|------------------------------------|
| <input type="checkbox"/> Sector A | <input type="checkbox"/> Sector F | <input type="checkbox"/> Sector K | <input type="checkbox"/> Sector P | <input type="checkbox"/> Sector U | <input type="checkbox"/> Sector Z |
| <input type="checkbox"/> Sector B | <input type="checkbox"/> Sector G | <input checked="" type="checkbox"/> Sector L | <input type="checkbox"/> Sector Q | <input type="checkbox"/> Sector V | <input type="checkbox"/> Sector AA |
| <input type="checkbox"/> Sector C | <input type="checkbox"/> Sector H | <input type="checkbox"/> Sector M | <input type="checkbox"/> Sector R | <input type="checkbox"/> Sector W | <input type="checkbox"/> Sector AB |
| <input type="checkbox"/> Sector D | <input type="checkbox"/> Sector I | <input type="checkbox"/> Sector N | <input type="checkbox"/> Sector S | <input type="checkbox"/> Sector X | <input type="checkbox"/> Sector AC |
| <input type="checkbox"/> Sector E | <input type="checkbox"/> Sector J | <input type="checkbox"/> Sector O | <input checked="" type="checkbox"/> Sector T | <input type="checkbox"/> Sector Y | <input type="checkbox"/> Sector AD |

8. Additional Facility/Site Requirements:

a. Based on the instructions provided in Addendum A of the MSGP, have the eligibility criteria for "listed species" and critical habitat been met? ☒ Yes ☐ No

b. Based on the instructions provided in Addendum B of the MSGP, have the eligibility criteria for protection of historic properties been met? ☒ Yes ☐ No

D. Certification

Do you certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted? Based on your inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, do you certify that the information submitted is, to the best of your knowledge and belief, true, accurate, and complete? Do you certify that you are aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations?

Print Name: ROBERT SMITH

Signature: Robert F. Small

Date: 03/05/23



David Norton
<dnorton@ci.brockton.ma.us>

06/08/2006 12:22 PM

To Steven Couto/R1/USEPA/US@EPA

cc James.lauzon@veoliawaterna.com,
michael.zeoli@veoliawaterna.com, epeach@aol.com

bcc

Subject Old Sub-Station

Hi Steve - me again, sorry I meant to also give you the old substation oil contents. As you know these will be removed completely during the final stages of the Phase 3 Upgrade at the AWRF.

Substations # 1 - 4 each has 2 transformers in each with each holding 266 gallons of type 1 oil.

Thanks

David A. Norton

City of Brockton

Water & Sewer Contract Administrator

303 Oak Hill Way

Brockton, MA 02301



winmail.dat



David Norton
<dnorton@ci.brockton.ma.us>

06/08/2006 11:52 AM

To Steven Couto/R1/USEPA/US@EPA

cc James.lauzon@veoliawaturna.com,
michael.zeoli@veoliawaturna.com, Joe Shepherd
<Joseph.Shepherd@state.ma.us>

bcc

Subject New Sub-Stations Brockton AWRF

Hi Steve,

I have CDM working on the other issues but below is what I have gotten from the Phase 1 Electrical Contractor relative to oil reservoirs in the new Electrical Sub-Stations.

Substations # 1 & 3 each has 2 transformers with each holding 360 gallons of type 2 oil

Substations # 2 & 4 each has 2 transformers with each holding 348 gallons of type 2 oil

David A. Norton

City of Brockton

Water & Sewer Contract Administrator

303 Oak Hill Way

Brockton, MA 02301



winmail.dat

USEPA REGION I FACILITY INFORMATION

Inspector's Name: <u>Steven Couto</u>		FRP REGIONAL #: <u>N/A</u>	
Inspection Team Members: <u>same</u>			
Type of Inspection: SPCC <input checked="" type="checkbox"/> FRP <input type="checkbox"/> SPCC and FRP <input type="checkbox"/> Follow-up Inspection <input type="checkbox"/> Plan Review <input type="checkbox"/>			
Name of Facility: <u>Brockton Wastewater Treatment Plant</u>			
Facility Address: <u>303 Oak Hill Way</u>			
City: <u>Brockton</u>	County:	State: <u>MA</u>	Zip: <u>02401</u>
Latitude:		Longitude:	
Nearest "Waters of the U.S.": <u>Salisbury Plain River</u>			
Facility Contact: <u>David Norton</u>		Title: <u>Contract Administrator</u> <u>Water & Sewer</u>	
Facility Contact: 2. <u>James Lanzon</u>		Title: <u>Project Mgr.</u>	
Telephone Number: <u>508 580 7885</u>			
Name of Owner/Operator: <u>City of Brockton, MA</u>			
Corporate Address: <u>City Hall 45 School Street</u>			
City: <u>Brockton</u>	State: <u>MA</u>	Zip: <u>02301</u>	
Corporate Contact: <u>Michael Thoreson</u>		Title: <u>Commissioner DFW</u>	
Telephone Numbers: 1. 2. <u>(508) 580-7135</u>			
Synopsis of business operations: <u>POTW</u>			
Facility is: <input type="checkbox"/> Unattended <input checked="" type="checkbox"/> Attended <input type="checkbox"/> 8 hrs <input checked="" type="checkbox"/> 24 hrs <input type="checkbox"/> Periodically <input type="checkbox"/> Other (Specify) _____			
How many employees at this Facility? <u>31</u>			
If unmanned, number of employees needed to operate the Facility?			

FACILITY STORAGE INVENTORY

ITEM	TANK ID NUMBER	SHELL CAPACITY	PRODUCT	ITEM	TANK ID NUMBER	SHELL CAPACITY	PRODUCT
1.	see attached sheet from draft SPCC by CDM			2.	55 gal drum	hydraulic oil in S.F. pump building	
3.	draft SPCC does not contain 4 electric			4.	3-55 gal drums of lube		
5.	substations owned by the POTW			6.	oil in Building 06		
7.				8.	3-55 gal Mobil	oil drums outside	
9.	During the inspection the following oil containers			10.	Tank 3'x3'x1' \approx 67 gal	Wolfshead Oil	
11.	were found that were not in the draft SPCC			12.	Tank \approx 500 gal diesel by		
13.	Tank 1'x3'x3' \approx 67 gal 10W-40 in lower			14.	pri clarifiers & aeration basins		
15.	incinerator building			16.			
17.	1-55 gal drum - waste oil in hazardous waste area			18.	Electrical Substations		
19.	1-55 gal drum No. 40 oil for blowers - outside			20.	4 old stations - 8 transformers 206 gal each Type 1 oil	2128 gal	
21.	new delivery			22.	will be replaced by 4 new substations - 8 transformers		
23.	4-55 gal - waste oil on pallets - outside			24.	Type 2 oil	2832 gal	
25.	trailer mounted generator by digester - 275 gal. tank			26.	by 2008.		

500 contained in SPCC
approximately 1624 more found during inspection

Total Bulk Above Ground Storage: 2124 gallons

Total Bulk Below Ground Storage: 13800 gallons

Total Oil-Filled Equipment Storage: 2832 gallons

14,000

Total Facility Oil Storage Capacity: 32,756 gallons

in 4 new electrical substations - will replace 4 old substations with 2128 gallons
2 new generators 7,000 gal AST each

The POTW is currently under construction for a major upgrade so some of the existing tankage will be removed and some new tankage will be added.

Revised: Feb 28, 2006 See attached table from SPCC Plan

Table 2-1
Brockton WWTF Oil Storage Summary

<i>Tank No.</i>	<i>Location</i>	<i>Type of Tank Container</i>	<i>Function</i>	<i>Size/Contents</i>	<i>Comments</i>
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Facility Diagram:



Description of the pathways that an oil spill might follow, leading to the "Waters of the United States".

Facility abuts the Salisbury Plain River

Memorandum of Understanding (check all applicable descriptions):			
<input type="checkbox"/> Non-Transportation Related		<input type="checkbox"/> Transportation Related	
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SPCC Part 112.1(b) <input type="checkbox"/> Drilling	<input type="checkbox"/> Producing <input type="checkbox"/> Gathering <input checked="" type="checkbox"/> Storing	<input type="checkbox"/> Processing <input type="checkbox"/> Refining <input type="checkbox"/> Transferring	<input type="checkbox"/> Distributing <input checked="" type="checkbox"/> Consuming oil/oil products
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Facility Type: <input type="checkbox"/> Bulk storage <input type="checkbox"/> Gas Station /Convenience <input type="checkbox"/> Petroleum Distributor	<input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Utilities <input checked="" type="checkbox"/> Local Gov. <input type="checkbox"/> State Gov. <input type="checkbox"/> Federal (Non-Military)	<input type="checkbox"/> Federal (Military) <input type="checkbox"/> Air Taxi (Airline) <input type="checkbox"/> Aircraft owner <input type="checkbox"/> Auto Dealership <input type="checkbox"/> Contractor <input type="checkbox"/> Farm	<input type="checkbox"/> Railroad <input type="checkbox"/> Residential <input type="checkbox"/> Trucking /Transport <input type="checkbox"/> Trustee/Native American <input type="checkbox"/> Other:

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 Mail Code: SEW
 U.S. Environmental Protection Agency
 New England Region
 One Congress Street
 Boston, MA 02114 - 2023

Please be advised that the facility's noncompliance with the Oil Pollution Prevention regulations at 40 CFR Part 112 constitutes a violation of the Clean Water Act for which both injunctive relief and penalties can be sought. Under the Clean Water Act, the facility is subject to penalties up to \$27,500 per day for violations occurring from January 31, 1997, through March 15, 2004, and up to \$32,500 per day for violations occurring after March 15, 2004.

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EPA Inspector Signature: Steven Couto Date: 6/1/06

EPA Inspector Printed Name: Steven Couto Title: Engineer



I acknowledge having received an SPCC inspection by EPA on this date.

Company Contact Signature: David A. Norton

Date: 6/1/06

Company Contact Printed Name: DAVID A. NORTON

Title: WATER & SEWER
CONTRACT ADMINISTRATOR
CITY OF BROCKTON

Brockton, MA Wastewater Treatment Facility

On Site Fuel and Diesel Oil Tanks

<u>Building Location</u>	<u>Installation Date</u>	<u>Fuel/Oil Type</u>	<u>Volume Capacity</u>	<u>Method of Construction</u>	<u>Use</u>	<u>Above or Underground</u>
# 1	1983	Diesel	2000	Double Wall Fiberglass	Generator	Underground
# 1	1983	Fuel Oil	1000	Double Wall Fiberglass	Oil Burner (Heating)	Underground
# 4	1983	Fuel Oil	550	Double Wall Fiberglass	Oil Burner (Heating)	Underground
# 6	1990	Diesel	200	Steel	Generator	Aboveground (attached to Genset)
# 7	1983	Diesel	550	Double Wall Fiberglass	Generator	Underground
# 9	1983	Fuel Oil	2000	Double Wall Fiberglass	Heat Exchanger (Heating)	Underground
# 11	1983	Fuel Oil	7600	Steel	Incinerator	Underground Vault
# 11	1983	Diesel	550	Steel	Generator	Underground Vault
Portable	NA	Diesel	275	Steel	Generator	Aboveground (attached to Genset)

Total Storage Capacities

	<u>Volume</u>
Underground	14,250
Aboveground	475

Note: The Wastewater Facility electrical supply system consists of 8 transformers each with a 266 gal. capacity. Oil utilized in these units is a non-petroleum base mineral oil so is not currently figured into the storage capacities.

USEPA REGION I FACILITY INFORMATION

Inspector's Name: <u>Steven Couto</u>		FRP REGIONAL #: <u>N/A</u>	
Inspection Team Members: <u>same</u>			
Type of Inspection: SPCC <input checked="" type="checkbox"/> FRP <input type="checkbox"/> SPCC and FRP <input type="checkbox"/> Follow-up Inspection <input type="checkbox"/> Plan Review <input type="checkbox"/>			
Name of Facility: <u>Brockton Wastewater Treatment Plant</u>			
Facility Address: <u>303 Oak Hill Way</u>			
City: <u>Brockton</u>	County:	State: <u>MA</u>	Zip: <u>02401</u>
Latitude:		Longitude:	
Nearest "Waters of the U.S.": <u>Salisbury Plain River</u>			
Facility Contact: <u>David Norton</u>		Title: <u>Contract Administrator</u> <u>Water & Sewer</u>	
Facility Contact: 2. <u>James Lauzon</u>		Title: <u>Project Mgr.</u>	
Telephone Number: <u>508 580 7885</u>			
Name of Owner/Operator: <u>City of Brockton, MA</u>			
Corporate Address: <u>City Hall 45 School Street</u>			
City: <u>Brockton</u>		State: <u>MA</u>	Zip: <u>02301</u>
Corporate Contact: <u>Michael Thoreson</u>		Title: <u>Commissioner DFW</u>	
Telephone Numbers: 1. 2. <u>(508) 580-7135</u>			
Synopsis of business operations: <u>POTW</u>			
Facility is: <input type="checkbox"/> Unattended <input checked="" type="checkbox"/> Attended <input type="checkbox"/> 8 hrs <input checked="" type="checkbox"/> 24 hrs <input type="checkbox"/> Periodically <input type="checkbox"/> Other (Specify) _____			
How many employees at this Facility? <u>31</u>			
If unmanned, number of employees needed to operate the Facility?			

FACILITY STORAGE INVENTORY

ITEM	TANK ID NUMBER	SHELL CAPACITY	PRODUCT	ITEM	TANK ID NUMBER	SHELL CAPACITY	PRODUCT
1.	see attached sheet from draft SPCC by CDM			2.	55 gal	drum hydraulic oil in	S.F. pump building
3.	draft SPCC does not contain 4 electric			4.	3-55gal	drums of lube	
5.	substations owned by the POTW			6.	oil in	Building 06	
7.				8.	3-55 gal	Mobil Oil drums	outside
9.	During the inspection the following oil containers			10.	Tank 3'x3'x1'	≈ 67 gal	Wolfhead Oil
11.	were found that were not on the draft SPCC			12.	Tank ≈ 500 gal	diesel by	
13.	Tank 1'x3'x3'	≈ 67 gal		14.	pri clarifiers & aeration basins		
15.	in incinerator building			16.			
17.	1-55gal drum-waste oil in hazardous waste area			18.	Electrical Substations		
19.	1-55gal drum No. 40 oil for blowers - outside			20.	4 old stations-8 transformers	206 gal each	Type 1 oil
21.	new delivery			22.	will be replaced by 4 new substations-8 transformers		
23.	4-55 gal - waste oil on pallets - outside			24.	Type 2 oil		2832 gal
25.	trailer mounted generator by digester - 275 gal. tank			26.	by 2008.		

500 contained in SPCC
approximately 1624 more found during inspection

Total Bulk Above Ground Storage: 2124 gallons

Total Bulk Below Ground Storage: 13 800 gallons

Total Oil-Filled Equipment Storage 2832 gallons in 4 new electrical substations - will replace 4 old substations with 2128 gallons

14,000 → 2 new generators 7,000 gal AST each

Total Facility Oil Storage Capacity: 32,756 gallons

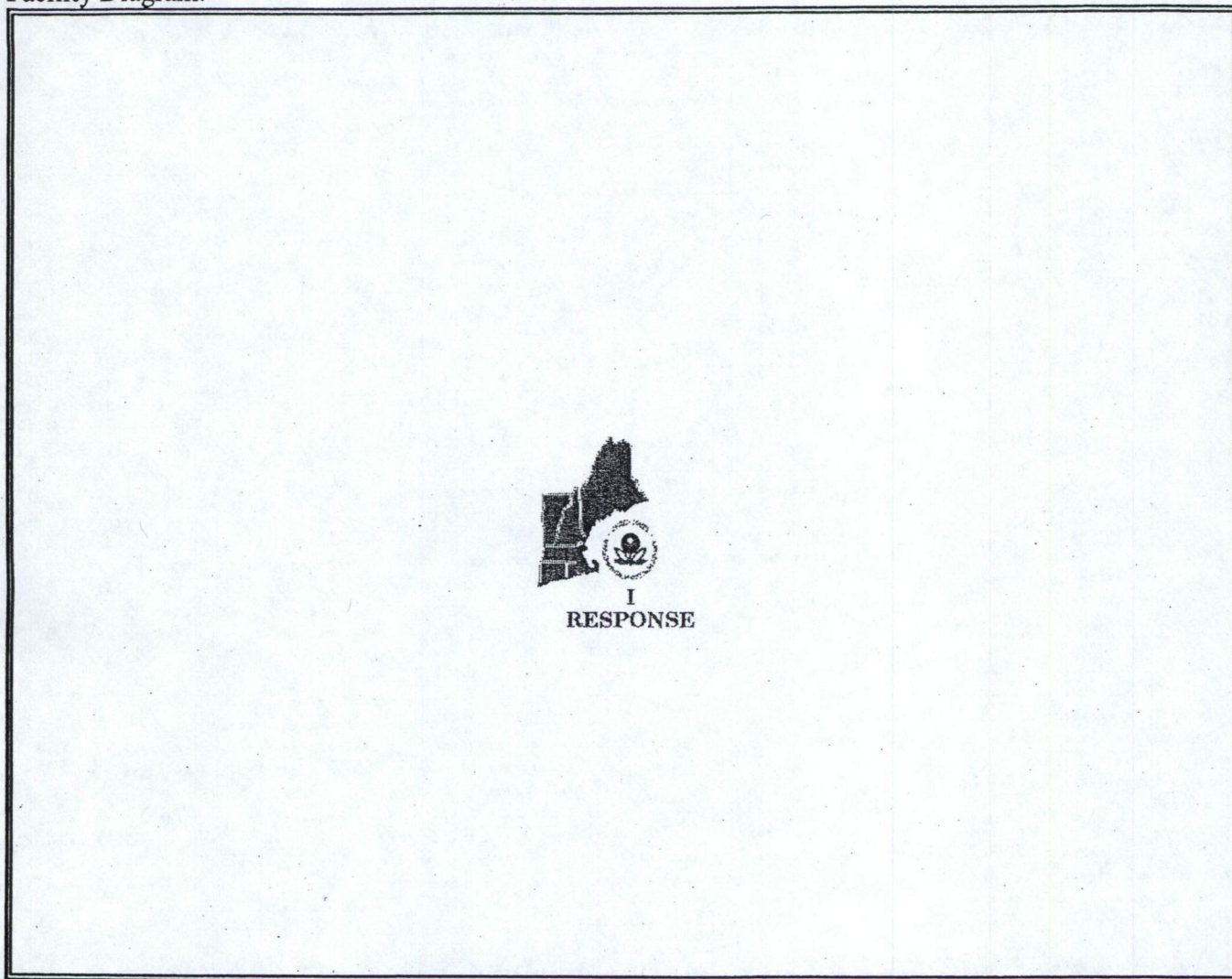
The POTW is currently under construction for a major upgrade so some of the existing tankage will be removed and some new tankage will be added.

Revised: Feb 28, 2006 See attached table from SPCC Plan

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Description of the pathways that an oil spill might follow, leading to the "Waters of the United States".

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EPA Inspector Signature: Steven Coubo Date: 6/1/06

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